

S&H Form: PTO/SB/30 (12/04)

REQUEST FOR CONTINUED EXAMINATION (RCE) **TRANSMITTAL**

(INCLUDING FILING FEE AND/OR PETITION FOR **EXTENSION OF TIME FEE)**

Subsection (b) of 35 U.S.C. §132, effective May 29, 2000 provides for continued examination of a utility or plant application filed on or after June 8, 1995. See The American Inventors Protection Act of 1999 (AIPA)

Box RCE PO Box 145		Attorney Docket No.:1293.1299C				
	VA 22313-1450					
First Named Inventor	Go-hyun KIM et al.					
Application No.	10/757,996	Group Art Unit	2652			
Filing Date	January 16, 2004	Examiner	Klimowicz, William Joseph			
CPA Filing Date		Confirmation No	5008			
Title of Invention	OPTICAL DISC CHANGE	:R				
a. Previously sul	d under 37 C.F.R. §1.114 (Bo omitted ne amendment(s)/reply under 37 C.					
(Any unente	ne amendment(s)/reply under 37 C. red amendment(s) referred to abov e arguments in the Appeal Brief or I	e will be entered).				
b. ⊠ Enclosed i. ⊠ Amendme ii. □ Affidavit(s						
2.						
Miscellaneous						
a. Suspension of months. Other	action on the above-identified applic ths. (Period of suspension shall not exce	cation is requested under 37 eed 3 months; Fee under 37 C.F.	C.F.R. §103(c) for a period of R. §1.17(i) required).			
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08/23/2005 JADDO1 00000112 10757996

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	Mile 5 5 July 3
/	PREMI & PAROCHES

				BASIC FEE				\$ 790.00		
hereby made f which the requ	ial Action set an good or an extension consiste fee is enclosed (); (4 months (\$	of time sed (1	to cover the month (\$12	e date thi 0)); (2 m	s RCE is fillonths (\$450	ed, for		330		
Claims As Amended	Claims Remaining After Amendment		est Number ously Paid For	Number Extra	Ra	te	و د جه			
Total Claims	24	29	- 20 =	0	X \$ 50.00) =		\$ 0.00		
Independent Claims	2	3	- 3 =	0	X \$ 200.0	00 =		\$ 0.00		
Suspension Fe	ee (\$130.00)						ļ			
Total of above Calculations =							\$	1120.00		
Reduction by 50% f	or filing by small entity (Note 37	C.F.R. 1.9, 1.27,	1.28).		<u>.</u>				
	TOTAL FEES DUE =									
A che Charg 7. GENERA The Com 37 C.F.R	OF PAYMENT ock in the amount ge "TOTAL FEES L AUTHORIZA" missioner is hereby aut	of \$ <u>\$</u> DUE" TION horized to during the	to Deposit	Account rpayment or if this applic	No. 19-393 charge any addration and of any	ditional fees u	nder 37	of this form is enclosed.) C.F.R. 1.16 (filing fees) of claiming benefit hereof		
	it Account No.		•							
8. CORRES	PONDENCE A	DDRE	SS							
				& HALS						
9. SIGNATU	IRE OF ATTOR	NEY (OR AGEN	T REQL	IRED					
NAME	Gene M. Gar	ner, II			REGISTRATION). 34,	172		
SIGNATURE	AM	14	P		DATE	Ayo	1 22	, 2005		
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